

Table 3
Norfolk Veterans Home
Summary of MEMBER Satisfaction Survey Responses
2010

Number of Survey Responses = 60

Living Environment (Facility Wide)	YES		NO		UNSURE	
	#	%	#	%	#	%
1. Is your living environment comfortable?	60	100%	0	0%	0	0%
2. Do you have enough privacy?	54	90.0%	5	8.3%	1	1.7%
3. Are your personal belongings safe here?	54	90.0%	2	3.3%	4	6.7%
4. Is the home clean and tidy?	59	100%	0	0%	0	0%
5. Is your room arranged the way you would like it to be?	55	93.2%	0	0%	4	6.8%
6. Does your room include some of your personal possessions?	56	96.6%	2	3.4%	0	0%
7. <i>If you were ill or injured, is it possible staff would not know it?</i>	<u>10</u>	<u>17.2%</u>	<u>40</u>	<u>69.0%</u>	<u>8</u>	<u>13.8%</u>
8. <i>Does the level of noise in the facility bother you?</i>	<u>6</u>	<u>10.3%</u>	<u>52</u>	<u>89.7%</u>	<u>0</u>	<u>0%</u>
9. <i>Is the facility in need of repair?</i>	<u>5</u>	<u>8.5%</u>	<u>48</u>	<u>81.4%</u>	<u>6</u>	<u>10.2%</u>
10. Are the grounds clean, well kept and attractive?	59	98.3%	0	0%	1	1.7%
11. Are the sidewalks and parking lot surfaces smooth and safe to walk on?	46	76.7%	3	5.0%	11	18.3%
12. Does the facility accommodate a good nights sleep?	56	94.9%	0	0%	3	5.1%

Dining Experience	YES		NO		UNSURE	
	#	%	#	%	#	%
13. Is food available whenever you are hungry?	52	89.7%	4	6.9%	2	3.4%
14. Do you feel you have enough time to eat?	59	98.3%	1	1.7%	0	0%
15. If you need assistance to eat, is there enough staff available to assist you?	48	90.6%	2	3.8%	3	5.7%
16. Are you served the types of foods you like?	41	73.2%	8	14.3%	7	12.5%
17. Are there enough different kinds of food to choose from?	46	78.0%	9	15.3%	4	6.8%
18. Do you get enough food to eat during meals?	56	94.9%	3	5.1%	0	0%
19. Are the temperatures of the meals you receive okay?	43	76.8%	10	17.9%	3	5.4%
20. Is the food you receive prepared to your liking?	39	69.6%	11	19.6%	6	10.7%
21. Do you feel the environment in the dining room helps you to enjoy your meals?	45	78.9%	7	12.3%	5	8.8%

Activities	YES		NO		UNSURE	
	#	%	#	%	#	%
22. Does the facility offer meaningful activities that you like to participate in?	55	91.7%	2	3.3%	3	5.0%
23. Is there enough opportunity to do self-directed activities such as reading, watching TV, or enjoying the outdoors etc?	57	95.0%	0	0%	3	5.0%
24. Are you informed of the activities available to you?	59	98.3%	0	0%	1	1.7%
25. Are you able to travel to off-campus outings when you want to?	51	87.9%	5	8.6%	2	3.4%
26. Does the facility offer sufficient entertainment for you to enjoy?	54	90.0%	2	3.3%	4	6.7%
27. Are there enough activities to choose from to meet your interests?	54	90.0%	4	6.7%	2	3.3%
28. Are activities offered during convenient time schedules?	58	96.7%	1	1.7%	1	1.7%
29. Do you get the help you need to attend activities?	56	94.9%	1	1.7%	2	3.4%
30. Do you have the opportunity to exercise and stay fit?	58	96.7%	0	0%	2	3.3%
31. Do you participate in facility-sponsored activities?	51	87.9%	6	10.3%	1	1.7%

Staff	YES		NO		UNSURE	
	#	%	#	%	#	%
32. Do the staff show they care about you?	58	98.3%	0	0%	1	1.7%
33. Do the staff respect your wishes?	56	94.9%	0	0%	3	5.1%
34. Do the staff understand what you are feeling or going through?	45	77.6%	3	5.2%	10	17.2%
35. Do the staff help you when you need it?	56	96.6%	0	0%	2	3.4%
36. When staff come into the room, do they tell you why they have come?	52	92.9%	2	3.6%	2	3.6%
37. Are the staff skilled and knowledgeable about how to take care of people?	55	93.2%	0	0%	4	6.8%
38. Do the staff answer your call light promptly?	52	89.7%	3	5.2%	3	5.2%
39. Do the staff follow-through with decisions that you make?	48	85.7%	3	5.4%	5	8.9%
40. Do staff knock before entering your room?	52	89.7%	3	5.2%	3	5.2%

Dignity	YES		NO		UNSURE	
	#	%	#	%	#	%
41. Do the staff call you by the name you prefer?	60	100%	0	0%	0	0%
42. Do the staff ensure that your personal hygiene is maintained?	57	98.3%	0	0%	1	1.7%
43. Is your personal physical privacy respected by staff?	55	93.2%	2	3.4%	2	3.4%
44. Do you have opportunities to help or support others?	46	79.3%	5	8.6%	7	12.1%
45. Do you feel a part of the daily activities of the home?	54	94.7%	1	1.8%	2	3.5%
46. Do you feel useful?	35	60.3%	9	15.5%	14	24.1%
47. Do you feel staff allow enough time for you?	50	90.9%	3	5.5%	2	3.6%
48. <i>Are you ever placed in a situation that makes you feel uncomfortable?</i>	<u>18</u>	<u>31.0%</u>	<u>37</u>	<u>63.8%</u>	<u>3</u>	<u>5.2%</u>
49. Do you feel staff are attentive to your needs?	55	94.8%	1	1.7%	2	3.4%
50. Are you treated with respect by staff?	55	94.8%	0	0%	3	5.2%

Autonomy	YES		NO		UNSURE	
	#	%	#	%	#	%
51. Are you encouraged to participate in decisions about your care?	50	86.2%	6	10.3%	2	3.4%
52. Do you decide what you are going to do each day?	53	88.3%	3	5.0%	4	6.7%
53. Do you express feelings and opinions around here?	48	82.8%	4	6.9%	6	10.3%
54. Is equipment available that allows you to be more independent? (e.g., wheelchairs, walkers, bars)	58	96.7%	0	0%	2	3.3%
55. Do you feel you can come and go as you please?	51	85.0%	7	11.7%	2	3.3%
56. <u>Do staff get back at you if you say or do something they don't like?</u>	<u>18</u>	<u>31.6%</u>	<u>33</u>	<u>57.9%</u>	<u>6</u>	<u>10.5%</u>
57. <u>Would you choose to have a different roommate?</u>	<u>6</u>	<u>11.1%</u>	<u>42</u>	<u>77.8%</u>	<u>6</u>	<u>11.1%</u>
58. Can you choose when to have your bath or shower?	37	62.7%	14	23.7%	8	13.6%
59. Are you free to make choices such as wear the clothes you want to wear or go to bed and get up when you wish?	56	94.9%	2	3.4%	1	1.7%
60. Are your spiritual or religious needs provided for?	56	94.9%	1	1.7%	2	3.4%
61. Do you feel you are given enough opportunity to be connected to the community?	52	88.1%	3	5.1%	4	6.8%

Medical Care and Treatment	YES		NO		UNSURE	
	#	%	#	%	#	%
62. Are you helped if you are in pain or uncomfortable?	55	96.5%	1	1.8%	1	1.8%
63. Can you talk to your doctor when you need to?	48	82.8%	2	3.4%	8	13.8%
64. Do you receive the treatments and medications you need?	55	98.2%	0	0%	1	1.8%
65. If you are not feeling well, do you get medical help when needed?	54	94.7%	1	1.8%	2	3.5%
66. Do you receive therapy if you need it?	56	98.2%	0	0%	1	1.8%
67. Would you recommend this Home to others?	56	96.6%	1	1.7%	1	1.7%

Background information

	Less than 6 mos	6 mos to 1 year	1 - 3 years	More than 3 years	
68. How long have you lived at this Veterans Home?	3	12	21	22	
Percent?	5.2%	20.7%	36.2%	37.9%	

	<65 Years	65 - 74 Years	75 - 84 Years	85+ Years	
69. What is your age?	5	7	22	24	
Percent?	8.6%	12.1%	37.9%	41.4%	

	Male	Female	
70. What is your gender?	46	14	
Percent?	76.7%	23.3%	

	YES	NO	UNSURE	
71. If you could go back in time, would you make the same decision to move to this Veterans Home again?	56	2	2	
Percent?	93.3%	3.3%	3.3%	

	YES	NO	UNSURE	
72. Would you recommend this Veterans Home to your family and friends?	57	0	3	
Percent?	95.0%	0%	5.0%	